



17224 U.S. PTO

COMMISSIONER FOR PATENTS
Mail Stop Patent Application
P.O. Box 1450
Alexandria, VA 22313-1450

PATENT APPLICATION
Date: November 24, 2003
File No. 2500.68761

Sir:

Transmitted herewith for filing pursuant to
35 U.S.C. 111(a), is the patent application of

Inventor(s): Kikuchi et al.

For: HEAD SUSPENSION ASSEMBLY
HAVING SMALLER STRAY CAPACITANCE

I hereby certify that this paper is being deposited with the United States Postal Service as EXPRESS MAIL in an envelope addressed to: Mail Stop PATENT APPLICATION, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on this date.

11-24-03
Date

Pat C...
Express Mail Label No.: EV032735533US

Enclosed are:

- (X) 12 pages of specification, including 11 claims and an abstract.
- () an executed oath or declaration, with power of attorney.
- (X) an unexecuted oath or declaration, with power of attorney.
- () sheet(s) of informal drawing(s).
- (X) 3 sheet(s) of formal drawings(s).
- () Assignment(s) of the invention to and Assignment Cover Sheet.
- () A check in the amount of \$ to cover the fee for recording the assignment(s).
- (X) Information Disclosure Statement, Form PTO-1449 and cited references.
- () Claim for Priority and Priority Document.



Preliminary Amendment

- (X) Please insert the following between the title and line 1 of the specification:
"This is a continuation of International PCT Application No. PCT/JP01/04388 filed May 25, 2001."

Fee Calculation For Claims As Filed

a) Basic Fee						\$ 770.00
b) Independent Claims	<u>3</u>	-	<u>3</u>	=	<u> </u>	x \$ 86.00 = \$ <u> </u>
c) Total Claims	<u>1</u>	-	<u>20</u>	=	<u> </u>	x \$ 18.00 = \$ <u> </u>
d) Fee for Multiple Dependent Claims						\$ 290.00 = \$ <u> </u>

Total Filing Fee \$ 770.00

() Applicant(s) qualifies as a Small Entity, reducing Filing Fee by half to \$

() A check in the amount of \$ to cover the filing fee is enclosed.

~~() The Commissioner is hereby authorized to charge any additional fees which may be required to this application under 37 C.F.R. 1.16-1.17, or credit any overpayment, to Deposit Account No. 07-2069. A duplicate copy of this sheet is enclosed.~~

Respectfully submitted,

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